

# Analysis of Factor Management in the Maternal Health Program at Puskesmas in District X as the Effort to Reduce MMR in 2018

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**Abstract.** X regency is ranked 2 (two) for the highest maternal mortality rate (MMR) in East Java in 2016. Puskesmas have a major role to decrease MMR in Indonesia. The program at Puskesmas focuses on preventive and promotional activities. The maternal health program that involve the role of midwives as good health and management officers can reduce the incidence of death which resulted in decreasing MMR. This study aims to analyze the factors of maternal health program management in Puskesmas including planning, organizing, actuating and controlling. Furthermore, the observational analytic method had been applied in several Puskesmas in the area of Jember Regency in May - September 2018. There were 34 Puskesmas as the research sample and the informants were in charge of maternal health programs at those Puskesmas. The samples were taken by proportional random sampling technique. In collecting the data, the researchers distributed questionnaire to the informants and the results were analyzed afterwards. It was shown that planning and organizing had been done but they were in fair category, actuating and controlling were in good category. It is highly probable that the implementation of maternal health programs in Puskesmas is related to the outcomes (performance) of achieving good health programs as well. The analysis continued by formulating recommendations through brainstorming activities involving all midwives and the heads of those Puskesmas. It resulted the need to provide motivation and supervision activities to the officers and the involvement of all parties in maintaining the MMR

## 1. Introduction

Maternal Mortality Rate (MMR) is an indicator of women's welfare, a welfare indicator of a nation as well as describing the results of a country's development achievements [1]. MMR in Indonesia is still quite high and far above the AKI of other ASEAN countries. According to Indonesia's health profile in 2015 AKI in Indonesia amounted to 305 / 100,000 Births of Life (KH). In 2016 Jember Regency was ranked second for the highest maternal mortality rate in East Java.

The Community Health Center (Puskesmas) has a major role and it is very vital in the efforts to reduce MMR in Indonesia. The health programs in Puskesmas are focused on preventive and promoting activities in the Maternal and Child Health program. The maternal health program that involves the role of midwives as health workers using good management can reduce the incidence of deaths which results in lowering the MMR. The results of the Jati & Sucipto [3] study showed that there was a relationship between management aspects of Grobogan District Health Center Pulmonary

TB (Tuberculosis) officers in the Province of Central Java with the coverage of pulmonary TB discovery in 2003. Terry [4] states that management is a typical process, which consists of planning, organizing, actuating, controlling which is done to determine and achieve the goals that have been determined by utilizing human resources and other resources. Basic resources are managed by the basic functions of management so that the targets can be achieved. Therefore, it can be assumed that the better the management implementation in the Puskesmas, the better results will be obtained. The purpose of this study is to formulate an effort to reduce MMR through the implementation of maternal health program management in Puskesmas which included planning, organizing, actuating and controlling.

## 2. Research Method

This study used observational analytic method and it was carried out in several Puskesmas in the area of Jember Regency in June - November 2018. The samples taken in this study amounted to 34 health centers and the research informants were in charge of the maternal health program at the Puskesmas. The sampling technique used was proportional random sampling.

The data collection was carried out by giving questionnaires to informants then analyzing them to identify the influence of program management factors, then the brainstorming was conducted to obtain information or opinions from the health center and the health department to formulate recommendations in reducing the maternal mortality rates (AKI) based on management factor analysis maternal health program for health centers in Jember District 2018.

## 3. Result and Achieved Outputs

Planning of Puskesmas maternal health program: Most Puskesmas (70.6%) have implemented the planning at the maternal health programs in sufficient category. However, these results still need to be optimized. The existence of indicators in the planning process or quality of planning results that are still not met by the majority of Puskesmas is also a proof that the implementation of the Puskesmas maternal health program planning in Jember Regency has not been maximized.

Some things that have been done in planning activities include: increasing the coverage of pregnant women and maternity services through cadre meetings, meeting community leaders, visiting homes, group counseling. In addition, the officer of the health center maternal health program in Jember District also conducted a mapping of the area in the form of data collection on the number of posyandu, data collection of resources, data collection on the coverage of pregnant and maternity women being served and setting targets for coverage. Planning is something that is very important and it underlies the implementation of the activities.

Terry [4] explains that planning is to arrange activities that will be carried out in the future by paying attention to the resources that are owned to achieve the targets that have been determined. So that by planning, it can optimize the resources to achieve the desired goals. In line with the research of Wijayanti [5], she mentions that planning which is not optimal will affect the desired target in the form of achieving CDR TB in TB control programs at the Puskesmas. Her study illustrates the successful implementation of the Pulmonary TB control program which is very dependent on management aspects in addition to the technical skills of each program management officer.

Organizing the Puskesmas maternal health program: The results shows that most Puskesmas (64.7%) are sufficient in organizing maternal health programs. However, the results of the study still need to be optimized again, considering that only a small number of Puskesmas (32.4%) have done the organizing well.

Organizing activity means that it has taken action to unite the main resources in an orderly way and to organize each in such a pattern, that they can carry out activities in order to achieve the stated goals [4]. The results of the identification of the organizing activities of the maternal health program activities are complemented by the presence of job descriptions and resource allocation. Although the job description is still not equipped with a separate description for each position including: promotional activities, counseling pregnant and maternity mothers, examination of pregnant women

and childbirth, filling and utilization of the MCH Handbook, ANC Referral assistance if needed, recording and reporting. The absence of a separate job description causes the work overlap each other.

The absence of a division of labor for each job in the maternal health program can be an obstacle in the implementation of the program. A job will not be effective if it is done only by an employee [2]. In line with the research of Wijayanti [5] that a less optimal Job description will certainly affect one's work. One job description indicator that cannot be fulfilled is a separate description application for each position. This will certainly lead to less clear job descriptions that exist.

Actuating the Puskesmas maternal health program: Most actuating of Puskesmas maternal health programs in Jember Regency run in good category. Even so, the actuating of the Puskesmas maternal health program in Jember Regency still needs to be improved considering that there are still 9 Puskesmas (26.5%) in the poor category. The results of identification on the quality of the actuating variables give the results of several variables achieved in the poor category. Most Puskesmas still have cross-program, cross-sector and community involvement that is lacking in promotional activities. The results of this study are in line with the research of Wijayanti [5] in which promotional activities involving cross-sector is a form of collaboration that might improve to find the patient. Jati & Sucipto [3] explained that the absence of collaboration was related to the results with the coverage of the case findings of Pulmonary TB at Grobogan District Health Center in Central Java Province in 2003.

Controlling the Puskesmas maternal health program: Most Puskesmas (55.9%) have controlled the Puskesmas maternal health program in good category. However, there are still 7 Puskesmas (20.6%) controlling the Puskesmas maternal health program in the poor category. The results of this study indicate that controlling the health program of maternal health centers in Kabupaten Jember is still not optimal. This is a possible cause of the finding of the Maternal Mortality Rate (MMR). According to Wijayanti's research [5] where controlling in the findings of TB patients in Puskesmas in Pasuruan Regency is still not optimal, it can affect the achievement of CDR TB Puskesmas. Terry [4] states controlling is done to find, correct important deviations in the results achieved from planned activities. Finally, with good controlling activities, the target of a program can be achieved.

#### **4. Conclusion And Recommendation**

##### *4.1 Conclusion*

1. Most Puskesmas (70.6%) have planned maternal health programs in sufficient category.
2. Most Puskesmas (64.7%) have enough to do organizing maternal health programs. However, the results of the study still need to be optimized, considering that only a small number of Puskesmas (32.4%) have done good organizing.
3. Most actuating of Puskesmas maternal health programs in Jember Regency run in good category. Even so, the actuating of the Puskesmas maternal health program in Jember Regency still needs to be improved considering that there are still 9 Puskesmas (26.5%) in the poor category.
4. Most Puskesmas (55.9%) have controlled the Puskesmas maternal health program in good category. However, there are still 7 Puskesmas (20.6%) controlling the Puskesmas maternal health program in the poor category. The results of the study indicate that controlling the health program of maternal health centers in Kabupaten Jember is still not optimal.

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